

REPORTS INVENTORY				CONTROL NO.	
PREPARE IN DUPLICATE				SRB 930 F	
TITLE OF REPORT (If a fill-in report include Form No.) 930 F UV RETRO-ACTIVE CASE				2. TYPE OF REPORT STATISTICAL NARRATIVE MACHINE-NAME LISTING	
3. FUNCTIONAL AREA	PERSONNEL	TRAINING	ADMIN. GENERAL OTHER (specify)		
	LOGISTICS	SECURITY			
	MEDICAL	FINANCE			
4. NO. OF COPIES PREPARED 3	5. FREQUENCY (weekly, monthly, quarterly, etc.) D	6. DISTRIBUTION (No. of components not number of copies) 2			
7. FORMAT (memorandum, form computer print-out, etc.) CP-O	8. ADP PROCESSING YES IF YES GIVE ADP PROCESSING NO. H-07		9. DIRECTIVE AUTHORITY REQUIRING REPORT		
10. PREPARING COMPONENT (Include lowest level contributing information to report)		11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)			
OCS/OPERATIONS					
12. COST FACTORS					
A. MANUAL PREPARATION AND REVIEW COSTS					
GRADE	HOURLY RATE	HOURS PER REPORT	COST PER REPORT	TIMES PREPARED	COST PER YEAR
GS-06-3	4.21	.43	1.81	26	47.06
B. COSTS OF COMPUTER PRODUCED REPORTS					
			.18	26	4.68
TOTAL COSTS PER YEAR					551.74
COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.					
MOR/CDF					
14. FUTURE GOALS					
PROPOSED BY COMPONENT FOR THIS REPORT RETAIN AS IS <input type="checkbox"/> OTHER (explain) CHARGE DISCLOSURE				ESTIMATED SAVINGS MAN-HOURS STAT DOLLARS	
DATE OF INVENTORY 2 NOV 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION		18. EXTENSION	